WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

Data File: f33_os_pub   **File Date:** 08/08/2007 **Structure:** Multiple rows per participant **Population:** OS participants

Participant ID

Variable # 1
Sas Name: ID
Sas Label: Participant ID
Type: Continuous

Usage Notes: none

Categories: Study: Administration

F33 Days since randomization/enrollment

Variable # 2
Sas Name: F33DAYS
Sas Label: F33 Days since randomization/enrollment
Type: Continuous

Usage Notes: none

Categories: Study: Administration

F33 Visit type

Variable # 3
Sas Name: F33VTYP
Sas Label: Visit type
Type: Categorical

Usage Notes: none

Categories: Study: Administration

Values

2	Semi-Annual Visit
3	Annual Visit
4	Non Routine Visit
6	Diet Intervention
7	Interim
8	Amendment

F33 Visit year

Visit year for which this form was collected.

Variable # 4
Sas Name: F33VY
Sas Label: Visit year
Type: Continuous

Usage Notes: none

Categories: Study: Administration

F33 Completed by whom

Who is completing this form

Variable # 5
Sas Name: F33WHOM
Sas Label: F33 Completed by whom
Type: Categorical

Usage Notes: Not collected on all versions of Form 33.

Categories: Study: Administration

Values

1	WHI participant (self)
2	Family or friend
3	Health care provider
8	Other

WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

Data File: f33_os_pub   **File Date:** 08/08/2007 **Structure:** Multiple rows per participant **Population:** OS participants

F33 Fainted or lost consciousness

Since your last medical update, have you fainted, blacked out, or lost consiousness?

Variable # 6

Sas Name: F33FAINT

Sas Label: F33 Fainted or Blacked out

Type: Categorical

Usage Notes: none

Categories: Medical History

Values

0	No
1	Yes

F33 How many times fallen

Since your last medical update, how many times did you fall and land on the floor or ground?

Variable # 7

Sas Name: F33FALLS

Sas Label: F33 Times Fallen

Type: Categorical

Usage Notes: none

Categories: Medical History

Values

0	None
1	1 time
2	2 times
3	3 or more times

F33 Physical Exam

Since your last medical update, which of the following exams, tests, or procedures have you had: Physical exam or check up

Variable # 8

Sas Name: PHYSEXAM

Sas Label: Physical Exam or check up

Type: Categorical

Usage Notes: Not collected on all versions of Form 33.

Categories: Health Care: Screening
Medical History

Values

0	No
1	Yes

F33 Eye Exam

Since your last medical update, which of the following exams, tests, or procedures have you had: Eye exam

Variable # 9

Sas Name: EYEEXAM

Sas Label: F33 Eye exam

Type: Categorical

Usage Notes: Not collected on all versions of Form 33.

Categories: Health Care: Screening
Medical History

Values

0	No
1	Yes

WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

Data File: f33_os_pub   **File Date:** 08/08/2007 **Structure:** Multiple rows per participant **Population:** OS participants

F33 Breast Exam

Since your last medical update, which of the following exams, tests, or procedures have you had: Breast exam

Variable # 10

Sas Name: BRSTEXAM

Sas Label: Breast Exam

Type: Categorical

Usage Notes: none

Categories: Clinical Tests: Breast Exam
Health Care: Screening
Medical History: Breast

Values

0	No
1	Yes

F33 Mammogram

Since your last medical update, which of the following exams, tests, or procedures have you had: Mammogram

Variable # 11

Sas Name: MAMMOGRM

Sas Label: F33 Mammogram

Type: Categorical

Usage Notes: none

Categories: Clinical Tests: Mammogram
Health Care: Screening
Medical History: Breast

Values

0	No
1	Yes

F33 Breast Biopsy or Aspiration

Since your last medical update, which of the following exams, tests, or procedures have you had: Test of breast tissue or fluid for disease (Breast biopsy or aspiration)

Variable # 12

Sas Name: BRSTBPSY

Sas Label: F33 Breast Biopsy Aspiration

Type: Categorical

Usage Notes: none

Categories: Clinical Tests
Health Care: Screening
Medical History: Breast

Values

0	No
1	Yes

F33 Rectal Exam

Since your last medical update, which of the following exams, tests, or procedures have you had: Rectal exam

Variable # 13

Sas Name: RCTLEXAM

Sas Label: Rectal Exam

Type: Categorical

Usage Notes: none

Categories: Clinical Tests
Health Care: Screening
Medical History: Colorectal

Values

0	No
1	Yes

WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

Data File: f33_os_pub   **File Date:** 08/08/2007 **Structure:** Multiple rows per participant **Population:** OS participants

F33 Hemoccult

Since your last medical update, which of the following exams, tests, or procedures have you had: Test for the presence of blood in your stool or bowel movement (Hemoccult, guaiac)

Variable #	14	**Usage Notes:**	none
Sas Name:	HEMOCLT		
Sas Label:	Hemoccult	**Categories:**	Clinical Tests
Type:	Categorical		Health Care: Screening
			Medical History: Colorectal

Values

0	No
1	Yes

F33 Flex Sig

Since your last medical update, which of the following exams, tests, or procedures have you had: Tube inserted into your bowel from below to check for bowel problems (Sigmoidoscopy, flex. sig., or colonoscopy)

Variable #	15	**Usage Notes:**	none
Sas Name:	FLEXSIG		
Sas Label:	Flex Sig	**Categories:**	Clinical Tests
Type:	Categorical		Health Care: Screening
			Medical History: Colorectal

Values

0	No
1	Yes

F33 Barium Enema

Since your last medical update, which of the following exams, tests, or procedures have you had: Barium enema x-ray

Variable #	16	**Usage Notes:**	Not collected on all versions of Form 33.
Sas Name:	BARIUM		
Sas Label:	Barium Enema	**Categories:**	Clinical Tests
Type:	Categorical		Health Care: Screening
			Medical History: Colorectal

Values

0	No
1	Yes

F33 Blood Pressure Check

Since your last medical update, which of the following exams, tests, or procedures have you had: Blood pressure check

Variable #	17	**Usage Notes:**	Not collected on all versions of Form 33.
Sas Name:	BPCHECK		
Sas Label:	Blood Pressure Check	**Categories:**	Health Care: Screening
Type:	Categorical		Medical History: Cardiovascular

Values

0	No
1	Yes

WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

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F33 Blood Cholesterol Test

Since your last medical update, which of the following exams, tests, or procedures have you had: Blood cholesterol test

Variable #	18	**Usage Notes:**	Not collected on all versions of Form 33.
Sas Name:	CHOLCHK		
Sas Label:	Blood Cholesterol Test	**Categories:**	Clinical Tests: Blood Health Care: Screening Medical History: Cardiovascular
Type:	Categorical		

Values

| 0 | No |
| 1 | Yes |

F33 ECG

Since your last medical update, which of the following exams, tests, or procedures have you had: Electrocardiogram (ECG)

Variable #	19	**Usage Notes:**	none
Sas Name:	ECG		
Sas Label:	ECG	**Categories:**	Clinical Tests: ECG Health Care: Screening Medical History: Cardiovascular
Type:	Categorical		

Values

| 0 | No |
| 1 | Yes |

F33 PTCA

Since your last medical update, which of the following exams, tests, or procedures have you had: Procedure to unblock narrowed blood vessels to your heart muscle (opening the arteries of the heart with a balloon or other device, sometimes called PTCA, coronary angioplasty, or coronary stent)

Variable #	20	**Usage Notes:**	Not collected on all versions of Form 33. See also the outcomes dataset for adjudicated PTCA.
Sas Name:	PTCA		
Sas Label:	PTCA	**Categories:**	Medical History: Cardiovascular Outcomes: Self Reported
Type:	Categorical		

Values

| 0 | No |
| 1 | Yes |

F33 Outpatient DVT

Since your last medical update, which of the following exams, tests, or procedures have you had: Shots at home for blood clots in legs followed by blood thinning medications (such as Coumadin, Warfarin)

Variable #	21	**Usage Notes:**	Not collected on all versions of Form 33. See also the outcomes data set for adjudicated DVT in the HT.
Sas Name:	OUTPDVT		
Sas Label:	Outpatient DVT	**Categories:**	Medical History: Other Disease/Condition Outcomes: Self Reported
Type:	Categorical		

Values

| 0 | No |
| 1 | Yes |

WHI Follow-Up Dataset

Form 33 - Medical History Update Faints, Falls, Exams, Tests, Procedures

Data File: f33_os_pub   **File Date:** 08/08/2007 **Structure:** Multiple rows per participant **Population:** OS participants

F33 Pap Smear

Since your last medical update, which of the following exams, tests, or procedures have you had: Pap smear

Variable #	22	**Usage Notes:** none	
Sas Name:	PAPSMR		
Sas Label:	Pap Smear	**Categories:**	Clinical Tests: Pap Smear
Type:	Categorical		Health Care: Screening
			Medical History: Reproductive

Values

0	No
1	Yes

F33 D and C

Since your last medical update, which of the following exams, tests, or procedures have you had: Dilation and Curettage (D and C, womb scrape)

Variable #	23	**Usage Notes:** none	
Sas Name:	DANDC		
Sas Label:	D and C	**Categories:**	Medical History: Reproductive
Type:	Categorical		

Values

0	No
1	Yes

F33 Endometrial biopsy

Since your last medical update, which of the following exams, tests, or procedures have you had: Endometrial biopsy

Variable #	24	**Usage Notes:** none	
Sas Name:	ENDOBPSY		
Sas Label:	Endometrial biopsy	**Categories:**	Clinical Tests
Type:	Categorical		Health Care: Screening
			Medical History: Reproductive

Values

0	No
1	Yes

F33 Hysterectomy

Since your last medical update, which of the following exams, tests, or procedures have you had: Removal of the uterus or womb (Hysterectomy)

Variable #	25	**Usage Notes:** none	
Sas Name:	HYSTEREC		
Sas Label:	Hysterectomy	**Categories:**	Medical History: Reproductive
Type:	Categorical		Outcomes: Self Reported
			Reproductive

Values

0	No
1	Yes